

NOTES:

- Potentially reversible causes of asystole: OD, hypovolemia, pneumothorax, tamponade, hypothermia, hypoxia, acidosis, hyper/hypokalemia, PE, coronary thrombosis.
- When unable to establish an IV, epinephrine and atropine are to be administered via ETT at 2.0 mg doses.
- The maximum total dose of atropine is 0.04 mg/kg.
- For pediatric patients:

Atropine is not indicated in patients less than 8 years old.

High dose epinephrine is not indicated in pediatric patients with IV/IO access.

High dose epinephrine is only indicated when administered via ETT.